

PUBLIC PROTECTION CABINET DEPARTMENT OF HOUSING, BUILDINGS & CONSTRUCTION MANUFACTURED HOUSING SECTION 101 SEA HERO ROAD, SUITE 100 FRANKFORT, KY. 40601-5412 (502) 573-1795 FAX (502) 573-1059



RECREATIONAL VEHICLE RETAILER APPLICATION

(1).	separate license is required for each sales lot. This application is only valid for the address below.			
(2).	Department of Revenue Sales and Use Tax Permit Number			
(3).	Name of Dealership			
(4).	Name of owner or partners (principal owners or corporate officers indicate percent of business owned and titl			
	NAME	PERCENT	TITLE	BIRTH MONTH
	PRINCIPAL OWNER			
Corpo	oration Name		Date of Incorp	poration
Chief	Managing Officer			
(5).	Location of established pla	ace of business, as define	ed in KRS 227.550	
	Address		City	Zip
Phone		Fax	E-mail	County
(6).	Do you own the property occupied by the dealership? YES NO If no, list the name and address of the landlord or lesser.			
(7).	Material of which display/storage lot is covered			
(8).	Approximate size of office			
(9).	Do you have a suitable sign with the dealership name and type of dealership? YESNO			

I have been convicted of a felony or a misdemeanor in the Commonwealth of Kentucky, any other state, or the United States. YES _____ or NO ____. If you marked yes you have been convicted of a felony or misdemeanor, you might not be able to receive a recreational vehicle retailer license at this time. Please contact the Manufactured Housing Section for further information. Pursuant to KRS164.772, if you are in default of student loans backed by the Kentucky Higher Education Assistance Authority, you cannot receive a recreational vehicle retailer license unless specified conditions are met. Please contact the Manufactured Housing Section for further information. License Fee must accompany this application. Date

INITIAL ALL THAT APPLY:

Title

